Department of Health Services
Laboratory Field Services
MS 7109
1111 Broadway, 19th Floor
Oakland, CA 94607-4036

APPLICATION FOR RENEWAL OF LICENSE
FOR THE PRODUCTION OF BIOLOGICS
Division 2, Chapter 4, California Health and Safety Code

Our records show that the License for the Production of Biologics:

ID number   .

Name   .

Address   .

City, state, ZIP code   .

Expires on: .

Note: Application for Renewal of License for the Production of Biologics must be submitted to the Department with fee not less than 10 days prior to the expiration date indicated. Failure to make a timely renewal shall result in expiration of the license. (Section 1616, California Health and Safety Code.)

INSTRUCTIONS: Please read all of the items below before completing and mailing your renewal.

Please complete this form and a personnel report for each of your sites. Return them with the necessary annual renewal fee to the California Department of Health Services, Laboratory Field Services, MS 7109, 1111 Broadway, 19th Floor, Oakland, CA 94607. Make check payable to California Department of Health Services.

1. If ownership, person in charge of biologics production, blood bank medical director, or location of facility have changed, please call Laboratory Field Services for a new application.

2. Please verify the number and location of blood collection centers operating under this license as shown on page 2. Make any necessary changes.

3. If biologics produced are not correctly shown on your current license, please submit changes on the reverse.

4. Please submit the approximate number of each type of product produced during the past year on the reverse.

APPLICATION IS HEREBY MADE FOR RENEWAL OF THE LICENSE FOR PRODUCTION OF BIOLOGICS.

➤ _____   _____
    Signature of person in charge of biologics production or blood bank medical director   Title

Signed this _____ day of _____ , _____in _____, California.
              Day   Month   Year   City

LAB 175 (3/04)

2. Our records indicate your facility operates the following off-site blood collection centers. If the information is *incorrect*, please include updated information with your renewal.

3. The biologics produced are not correctly shown on the current license; please submit changes.

ADD   **DELETE**

4. Please submit the approximate number of each type of biologic product produced during the past year.

LAB 175 (3/04)